TRANSMITTAL FORM			Application Number	10/602	10/602,045				
			Filing Date	6/24/20	6/24/2003				
			First Named Inventor	Harina	Harina				
			Art Unit	1637	1637				
(to be used for all correspondence after initial filling)			Examiner Name		YOUNG J KIM				
Total Number of Pages in This Submission 3			Altorney Docket Number	3r 115-00-	115-00400.US3				
ENCLOSURES (Check all that apply)									
Fee Transm	smittel Form			Drawing(s)				Niowance Communication to TC il Communication to Board leals and Interferences	
After Finel Affidavis/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Rems			Petition to Convert to a Provisional Application Provisional Application Provisional Application Change of Correspondent Terminal Disadainre Request for Refund CD, Number of CD(s) Landscape Table or irks	ce Address		Il Communication to TC Il Notice, Brief, Reply Brief) eterly Information Letter Enclosure(s) (please Identify			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name	The Law Office of Jane K. Babin, P.C.								
Signature /Jane K, Babin/									
Printed name	inted name Jane K. Babin								
Date	Novem	ber 27, 2011	Reg. No. 47224						
CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being electronically transmitted to the USPTO Via EFS-Web on the date shown below:									
Signature		/Jane K. Babir	n/						
Typed or printed name Jane K Babir		Jane K Babin					Date	November 27, 2011	

This addition of information is required by 3T CER 1.5 The information is required to belief or stating a brendf by the public which is not file factor by the USETO to proceed an application. Confidentiality is appointed by \$3.05 C, 122 and \$1.05 FR.1 1 and 1.4 in. This collection is estimated to 7 hours to complete, including submiting, preparing, and supmitting the completed application form to the USETO. These will very despending upon the involvable calculations. Any comments on the manufact of time byte require the complete this form and/or supgesterons for reducing his burder, should be sent to the Collect Information CHIE. A.D. Pattern and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SERD FEES OR COMPLETED FORMS TO THIS ADDRESS. SERVO TO: Commission order for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450.